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23971 7590 04/04/2006

BENNETT JONES  
 C/O MS ROSEANN CALDWELL  
 4500 BANKERS HALL EAST  
 855 - 2ND STREET, SW  
 CALGARY, AB T2P 4K7  
 CANADA

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/644,749	08/21/2003	James I. Livingstone	A894630US	7633

TITLE OF INVENTION: REVERSE CIRCULATION DIRECTIONAL AND HORIZONTAL DRILLING USING CONCENTRIC COIL TUBING

05/09/2006 TBESHAH2 00000033 10644749

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	ISSUE FEE(S) DUE	DATE DUE
nonprovisional	YES NO	\$700 \$1400	\$300	\$1000	07/05/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
THOMPSON, KENNETH L	3672	175-06 1000		\$1,700	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 BENNETT JONES LLP  
 2  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

PRESSOL LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CALGARY, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2057 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Irene T. Bridger*  
 TYPED OR PRINTED NAME  
 IRENE T. BRIDGER

Date

May 8, 2006

Registration No.

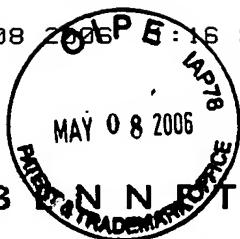
53,914

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BENNETT JONES

## FAX MESSAGE

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Alexandria, VA 22313-1450  
USA

**Bennett Jones LLP**  
4500 Bankers Hall East  
855 - 2nd Street S.W.  
Calgary Alberta  
T2P 4K7

Tel 403.298.8157

Fax 403.265.7219

FAX NO. 1-(571)-273-2885

PHONE NO.

DATE May 8, 2006

This is the first page of 3

FROM Irene Bridger

LAWYER NO 1058 FILE NO 52502-17

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### MESSAGE

USSN 10/644,749

Submission of Issue and Publication Fees for a Large Entity

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